



# Preauthorized Payment Debit/Credit Authorization

I (we) hereby authorize Texas Health Credit Union, hereinafter called "THCU", to initiate entries to my (our) \_\_\_\_\_ Checking \_\_\_\_\_ Savings account (select one) indicated below and the depository named below hereinafter called DEPOSITORY, to debit same such account.

**DEBIT**

DEPOSITORY NAME \_\_\_\_\_

DEPOSITORY PHONE \_\_\_\_\_

TRANSIT/ABA NO. \_\_\_\_\_

ACCOUNT NO. \_\_\_\_\_

This authority is to remain in full force and effect until THCU and DEPOSITORY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford THCU and DEPOSITORY a reasonable opportunity to act on the notification.

**CREDIT**

NAME(S) \_\_\_\_\_

PHONE NO. \_\_\_\_\_

ACCOUNT NO. \_\_\_\_\_ SUFFIX \_\_\_\_\_

I agree that the amount of the payment to be deducted monthly may change if additional advances are made under my Loanliner Plan to the account indicated above. The current amount to be deducted is:

PAYMENT AMOUNT \_\_\_\_\_

DEPOSIT AMOUNT \_\_\_\_\_

STARTING DATE \_\_\_\_\_

***PLEASE ATTACH YOUR VOIDED CHECK HERE !!!***

\_\_\_\_\_  
*SIGNATURE*

\_\_\_\_\_  
*DATE*

.....  
Add to LN \_\_\_\_\_ debit      Add to Account Message \_\_\_\_\_      Add to Excel/Log \_\_\_\_\_  
Add to LN \_\_\_\_\_ credit      Add to M767 screen \_\_\_\_\_